

**2004**  
**WISCONSIN**

**school health-related  
policies and practices**

Profile Report

Wisconsin Department  
Of Public Instruction



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**2004**

**Wisconsin School Health Education  
Profile Report: School Health-Related  
Policies and Practices**

**for  
Wisconsin Department of Public Instruction  
by**

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# Introduction

## BACKGROUND

The School Health Education Profile (SHEP) health teacher questionnaire was developed by the Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (CDC) in collaboration with representatives of state, local, and territorial departments of education and health. These surveys were designed to help state and local education agencies to monitor characteristics of and assess trends in health education in middle/junior high school and high school.

The first SHEP questionnaires were conducted in a sample of Wisconsin middle/junior high schools and high schools in 1994. The questionnaires were administered again in 1998, 2002, and 2004 by the Wisconsin Department of Public Instruction (DPI). These health reports provide statewide data representative of all public middle school and high schools regarding health education curriculum and other health-related school policies.

The source for SHEP data: [www.dpi.state.wi.us/dpi/dlsea/sspw/shepindex.html](http://www.dpi.state.wi.us/dpi/dlsea/sspw/shepindex.html).

## METHODS

All regular public secondary schools serving at least one of the grades 6 through 12 were included in the school sampling frame provided by the DPI. Systematic probability sampling with a random start was used to select schools for the survey. Schools were sorted by estimated enrollment (from DPI enrollment records) in the target grades within the school grade level (middle schools, high schools, other) prior to sampling. For each of the 425 regular secondary public schools included in the sample, principals, lead health teachers, and lead physical education teachers were asked to complete a questionnaire.

In Wisconsin, a total of 313 out of 425 (response rate of 74%) principal questionnaires and 317 out of 425 (response rate of 75%) lead health teacher questionnaires were received and included in the analyses. Additionally, a total of 304 out of 425 (response rate of 72%) lead physical education teacher questionnaires were received and included in analyses. Findings for this report are based on the data gathered from completed questionnaires and represent Wisconsin public secondary schools.

Data are presented in seven major topic areas related to school policy, including: School Health Program Policies, Physical Education Program, Nutrition, Tobacco, Violence Prevention, Asthma, and HIV. Selected key questions are highlighted in each of these topic areas, followed by a brief discussion section.

## Wisconsin Principal Survey Results

### School Health Program Policies:

	<u>Middle</u>	<u>High</u>	<u>Junior/ Senior</u>	<u>Overall</u>
Health education is...				
required	92	99	100	96
combined with PE	44	31	50	41
combined with other subjects	26	17	25	22
guided by an advisory group	63	58	45	57

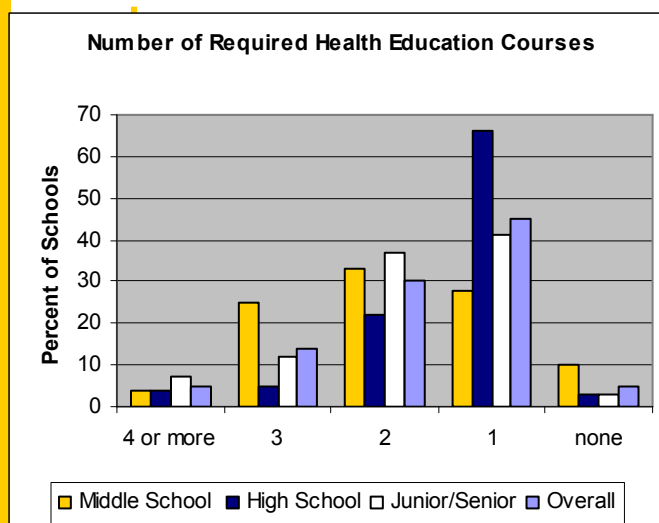
2004 Wisconsin SHEP

### Discussion:

According to 2004 SHEP survey data, over 90% of the principals stated that health education was required at both middle and high school levels. Sixty-six percent of high school students currently receive one health course. While, 61% of middle school students receive two or three health courses.

Wisconsin law requires that students in grades 7-12 receive a minimum of a 1/2 credit of health instruction. Principals report that the majority of districts are exceeding this requirement. Such data indicates that Wisconsin communities see the value health has for the future of their children.

Fifty-seven percent of principals report their school districts have a health advisory group or committee that guides their health education curriculum and policies. Advisory groups can provide districts with a sense of partnership. A benefit of these collaborative efforts is that all stakeholders, such as students and families, have the opportunity to share in the decision making process.

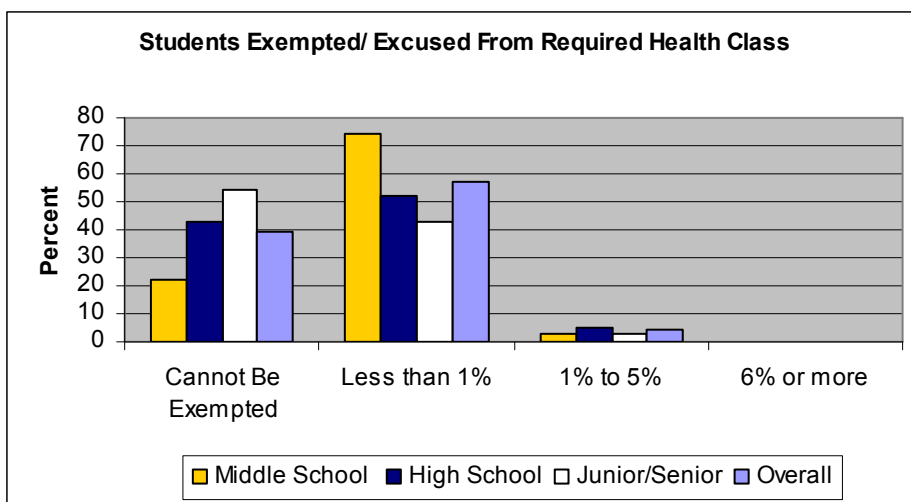


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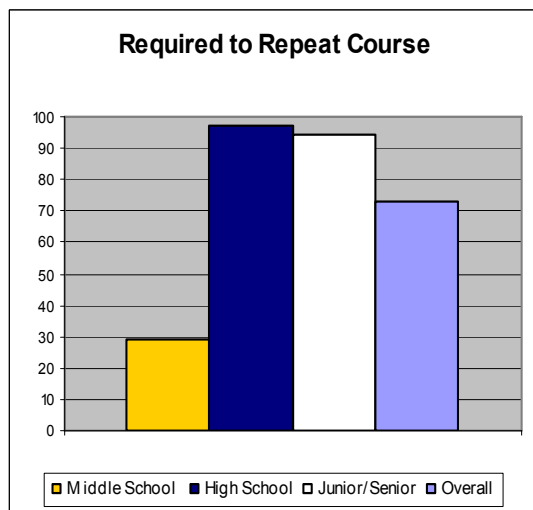
# School Health Program Policies:



The vast majority of students in Wisconsin were rarely exempted or excused from required health education courses. Overall, 39% of principals reported that students cannot be exempted or excused. Further, 57% of all principals reported that less than 1% of students were exempted or excused. Again, this may reflect the value Wisconsin communities place on teaching their children about health.



Most high school principals reported (97%) that students are required to repeat health education courses if they fail. While only 29% of middle school principals indicated that students who fail health must retake it. These statistics may suggest that districts use the high school health education experience to meet the state requirement.



# Physical Education Program Policies

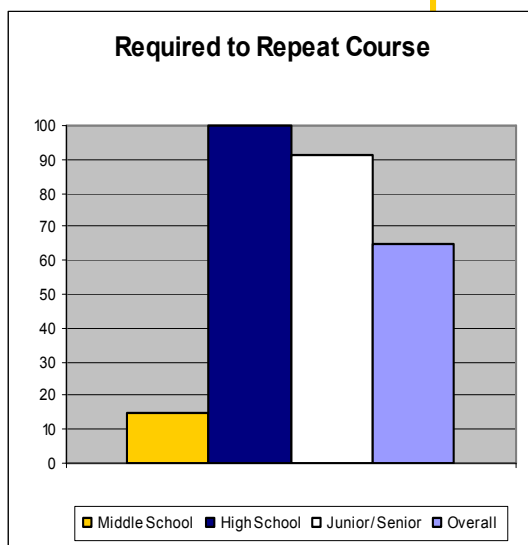
	<u>Middle</u>	<u>High</u>	<u>Junior/ Senior</u>	<u>Overall</u>
Require Physical Education	97	98	97	97
<b>Exemptions</b>				
Enrollment in other courses	1	1	5	2
Participation in school sports	0	1	0	0
Participation in other school activities	1	0	0	0
Participation in community sports	1	1	0	1

2004 Wisconsin SHEP



Physical education is required by 97% or more of Wisconsin school districts. Similarly to health education, the number of exemptions for students in physical education is extremely low. Wisconsin is to be commended for providing students with physical education experiences, given the current health issues youth are facing today (e.g., obesity, diabetes, and high cholesterol).

All high school principals reported that students were required to repeat physical education if they fail it. However, 15% of middle school principals stated that students were required to retake physical education. As identified earlier, this pattern also exists with health education. It appears that Wisconsin school districts meet the state requirements for physical education at the high school level.



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**“In the United States, nearly 9 million youth are overweight.”<sup>4</sup>**

# Health Policies

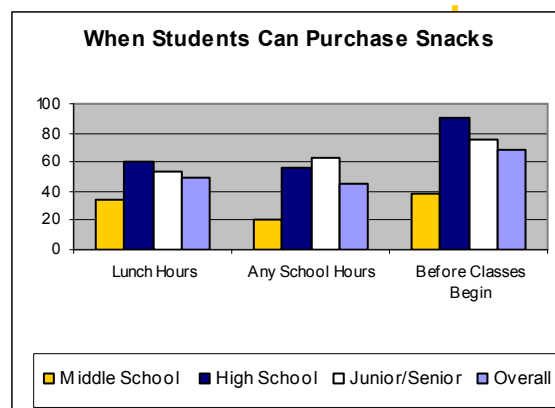
## Nutrition:

According to 91% of high school principals, students have the opportunity to purchase snacks before classes begin. However, one strategy for promoting healthy eating is to prohibit the sale of foods with minimal nutritional value until after the last lunch period.<sup>1</sup>

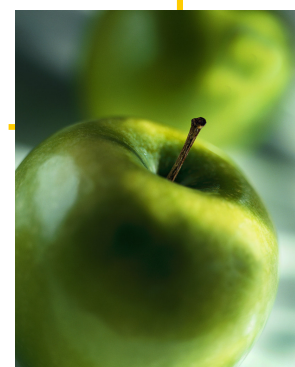
Schools should be offering students appealing, healthy food and beverage choices in vending machines, and at the school store, canteen, or snack bar (e.g., fruits, vegetables, whole grains, and low fat dairy products).<sup>1</sup> On the contrary, Wisconsin principals reported fruits and vegetables were not provided as often for students to purchase as other less healthy choices.

It has been established that if unhealthy eating habits begin during childhood, they often continue throughout adulthood. Based on the 2003 Wisconsin Youth Risk Behavior Survey (YRBS)\* results, 66% of students reported they eat less than 3 servings of fruits and 82% reported they eat less than 3 servings of vegetables.<sup>2</sup> Similarly, 77% of adults in the United States reported eating fewer than five servings of fruits and vegetables a day.<sup>3</sup> Therefore, schools should make an effort to provide more opportunities for students to select healthier snack choices.

\*The 2003 Wisconsin YRBS monitors health-risk behaviors of the state's adolescents.



2004 Wisconsin SHEP



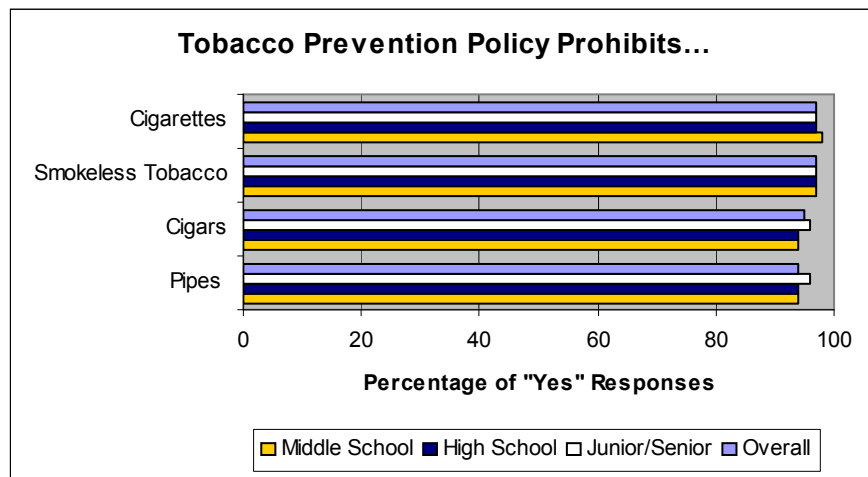
The long term consequences of being overweight include heart disease, some cancers, diabetes, stroke, and arthritis.<sup>3</sup>

Items that can be purchased from vending machines or at the school store, canteen, or snack bar	Middle	High	Junior & Senior	Overall
Chocolate candy	42	72	59	58
Other kinds of candy	49	76	61	63
Salty snacks not low in fat (e.g. potato chips)	54	81	71	69
Salty snack that are low in fat (e.g. pretzels)	65	86	73	75
Fruits or vegetables	38	66	38	49
Low-fat cookies, crackers, cakes, pastries, or other low-fat goods	52	70	58	61
Soft drinks, sports drinks, or fruit drinks that are not 100% juice	88	96	99	94
100% fruit juice	80	88	89	86
Bottled water	93	95	97	95

2004 Wisconsin SHEP

# Health Policies

Today, cigarette smoking is attributed to the leading causes of death and disability.<sup>5</sup>



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## Tobacco:

Nearly 100% of principal responses indicate that Wisconsin school districts have policies prohibiting the use of all tobacco products. Tobacco-related advertisements were prohibited by 90% or more of the school districts in school buildings, on school grounds, on school vehicles, in school publications, and through sponsorship of school events. More specifically, at least 88% of principals reported that students were prohibited from wearing tobacco brand-name apparel or carrying tobacco merchandise. However, only 68% of all school districts have signs posted marking a tobacco-free school zone.

Prohibiting the use of tobacco by students, staff, and visitors, as well as prohibiting tobacco-advertising have been identified as key strategies in establishing tobacco-free schools. Wisconsin school districts have successfully implemented these strategies. Yet, another method used to assist districts in establishing tobacco-free schools is communicating policies on tobacco use. It is suggested that more districts post signs marking tobacco-free school zones.

**DRUG  
FREE  
SCHOOL  
ZONE**

Research indicates the younger people begin smoking the more likely they are to become addicted to nicotine for life.<sup>5</sup>



# Health Policies

Actions ALWAYS/ALMOST ALWAYS taken when students are caught smoking cigarettes	Middle	High	Junior & Senior	Overall
Referred to school administrator	99	93	94	96
Parents or guardians are informed	100	90	91	94
Referred to legal authorities	51	69	47	56
Referred to school counselor	50	23	41	38
Suspended from school	38	21	36	32
Given in-school suspension	25	17	31	24
Placed in detention	23	12	20	18
Encouraged, but not required to participate in an assistance, education, or cessation program	24	13	24	20
Required to participate in an assistance, education, or cessation program	7	5	8	6

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“Each day in the United States, approximately 4,000 youths aged 12-17 try their first cigarette.<sup>6</sup>”



## Tobacco:

When Wisconsin students are caught smoking cigarettes, the actions that are always/almost always taken are punitive in nature (e.g., referred to school administrator, parents or guardians are informed, and referred to legal authorities). Furthermore, 38% of middle school principals reported students were suspended from school if they were caught smoking cigarettes. However, high school principals stated only 21% of high school students are suspended for this same behavior.

Data suggests that students caught smoking cigarettes experience some form of punishment for participating in this unhealthy behavior. Yet, research states that schools should offer school and community tobacco-use cessation services to students who smoke as a source of support for quitting.<sup>1</sup> Currently, 6% of all principals reported such services are required at their middle school or high school.

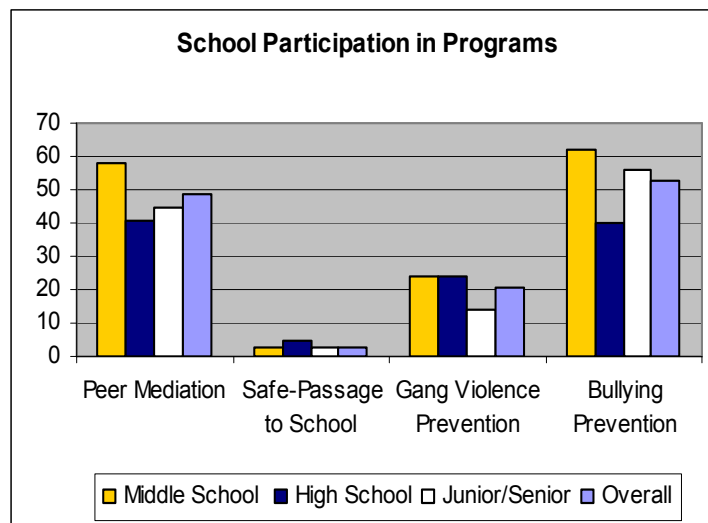
Fifty-four percent of Wisconsin students who currently smoke, have tried to quit smoking during the past 12 months.<sup>2</sup>

# Health Policies

## Violence Prevention:

Although youth violence receives much media attention, current statistics show that adolescent arrest rates for violent crimes have reached the lowest level in two decades.<sup>7</sup> However, according to 2003 Wisconsin YRBS data, 31% of students were in a physical fight one or more times during the past 12 months. Twelve percent of students were in a physical fight on school property one or more times during the past 12 months.<sup>2</sup>

A variety of safety and security measures are currently being implemented in the majority of Wisconsin middle and high schools. The most commonly implemented programs targeting adolescent violence include the following efforts: bullying prevention, peer mediation, and gang violence prevention. Ongoing support for the safety and security of Wisconsin adolescents illustrates a commitment to ensuring the well-being of its youth.



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Safety and security measures implemented by schools	Middle	High	Junior & Senior	Overall
Require visitors to report to the main office or reception area upon arrival	100	98	100	99
Use staff or adult volunteers to monitor school halls during and between classes	91	78	75	83
Maintain a "closed campus" where students are not allowed to leave school during the day. Including during lunchtime	99	51	66	74
Routinely conduct bag, desk, or locker checks	45	50	63	52
Prohibit students from carrying backpacks or book bags at school	71	33	38	49
Have uniformed police, undercover police, or security guards during the regular school day	35	47	13	33
Use metal detectors	5	2	4	4
Require students to wear identification badges	4	0	0	2
Require students to wear school uniforms	2	0	3	1

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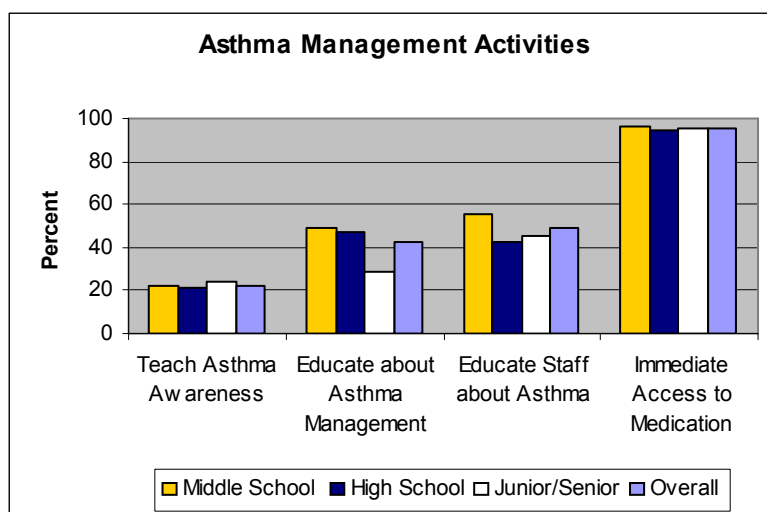


# Health Policies

## Asthma:

At least 94% of schools provide students who have asthma with immediate access to prescribed medications. With the rise in asthma cases, it is troubling to see that less than 50% of the school districts spend time educating faculty, staff, and students on this issue.

For example, only 49% of schools educate staff on asthma and only 22% of schools provide students with asthma awareness in at least one grade. Further, only 43% of schools provide education on managing asthma for students.<sup>8</sup> If Wisconsin wants to meet the health issues of all students, asthma education needs to be better addressed.



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## HIV:

Only 55% of all schools, 53% of middle schools, and 58% of high schools have adopted a written policy that protects the rights of students and/or staff with HIV infection or AIDS. Those principals reporting having a policy stated the most key issues related to HIV infection are in their policies. Individual rights are being protected and safety issues are being addressed at the majority of schools. A specific policy addressing HIV/AIDS or issues related to HIV/AIDS needs to be included in other health-related policies.

Issues Addressed in the HIV Infection Policy	Middle	High	Junior & Senior	Overall
Procedures to protect HIV-infected students and staff from discrimination	91	94	94	93
Maintaining confidentiality of HIV-infected students and staff	95	98	97	97
Worksite safety	98	96	97	97
Adequate training about HIV infection for school staff	84	81	83	83

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# Conclusions & Recommendations

## CONCLUSIONS:

- Wisconsin school districts provide at least one required health course for grades 7-12. Over 50% of districts have an advisory group that guide their health curriculum process.
- Physical education is required for nearly all Wisconsin adolescents and students are rarely exempted from courses.
- Most school districts provide students the opportunity to purchase snacks before and during school and offer sweetened beverages and unhealthy snacks. Overall less than half of the schools provided fruits or vegetables as options for students to choose from.
- Virtually all principals reported having policies that prohibited the use of tobacco products. Yet, most schools do not encourage or require any type of cessation program when students are caught smoking cigarettes.
- The majority of principals indicated that a variety of measures were implemented to keep schools safe and secure. The most common measures were requiring visitors to check in, monitored hallways, and maintaining a closed campus.
- Adolescents with asthma were provided immediate access to their medication. Though, efforts to educate students and staff about asthma were lacking in many schools.
- Only 55% of principals reported their schools had policies that protected HIV-infected students and staff from discrimination and maintained their confidentiality.

## RECOMMENDATIONS:

- Schools should limit access to unhealthy snacks (e.g., high caloric/low nutrients) and sweetened beverages and offer healthy options in vending machines or snack bars. Provision of healthier snack choices is a critical component to assisting students form lifelong healthy eating habits.
- Schools need to offer smoking cessation programs for students who are caught smoking.
- For rates of violence to remain low, the commitment to support safety and security measures in Wisconsin schools should continue .
- Asthma education needs to become a youth health topic that receives attention at all levels (i.e., faculty, staff, and students).
- School districts must increase the provision of training about HIV infection available for school staff.

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